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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

none LB

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

none LB

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY OR	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature: <i>LB</i> Initials: <i>LB</i>		2	24	3

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## TITLE

Fabre-perot interferometer

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
RECEIVED 842		<input type="checkbox"/> 1.16 Fees ( Filing )
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